

Detailed Information for Completing BNL Online Registration

How Many Family Members Accompanying You to BNL: 0

NOTE: Accompanying Member Section should be left blank

Purpose of Visit: EXPERIMENT

Dept./Div. To be assigned: .RHIC & AGS USERS

Experiment/Facility: NSRL

Facility Code: Summer School

Type of Research: OPEN RESEARCH

Type of Access Requested: PHYSICAL ONSITE ACCESS TO BNL

Expected Start Date: (mm/dd/yyyy): May 28, 2008

Expected End Date: (mm/dd/yyyy): June 21, 2008

Number of days you estimate to be onsite over a two-year:
CONTINUOUSLY < 30 DAYS

Subject Code for this Visit/Assignment: BIOLOGICAL RADIATION EFFECTS

Justification of visit/assignment; include specific activities, involvement, subjects to be discussed or statement of research in which you wish to be assigned: SUMMER STUDENT FOR NSRL

Conducting Thesis Research During Visit/Assignment? NO

First Name of BNL Host for visit/assignment: PETER

Last Name of BNL Host for visit/assignment: GUIDA

Do you have health insurance coverage which is valid while you are at BNL?

Foreign nationals should say NO if they do not have international medical insurance coverage (they are staying at BNL for less than 30 days).

U.S. Citizens who do not have medical insurance should also say NO.

Do you require housing? YES

AFFILIATION INFORMATION

All items pertain to each individual's current affiliation/Institution and are self explanatory

FOREIGN INFORMATION

All items in this section are self explanatory except for the following questions, which should be answered as follows:

Will you require a J-1 Visa: NO

Identify any specific international agreement: NONE OR UNKNOWN